

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Continuing A Majority Party Action Committee (CAMPAC)

ADDRESS (number and street)

5915 Eastman Avenue

Suite 100

☐ Check if different than previously reported. (ACC)

Midland

MI

48640-6824

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00350462

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☒ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
11 01 2011

through

M M M / D D D / Y Y Y Y Y Y  
11 30 2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Jacqueline Medema

Signature of Treasurer

Jacqueline Medema

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
12 20 2011

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
OnlyFEC FORM 3X  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Continuing A Majority Party Action Committee (CAMPAC)

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
11		01		2011

To:

M M	/	D D	/	Y Y Y Y Y
11		30		2011

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2011</td></tr></table>	Y	Y	Y	Y	Y	2011						<table><tr><td colspan="5">158525.31</td></tr></table>	158525.31				
Y	Y	Y	Y	Y													
2011																	
158525.31																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">206330.9</td></tr></table>	206330.9															
206330.9																	
(c) Total Receipts (from Line 19) .....	<table><tr><td colspan="5">41048.46</td></tr></table>	41048.46					<table><tr><td colspan="5">375828</td></tr></table>	375828									
41048.46																	
375828																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">247379.36</td></tr></table>	247379.36					<table><tr><td colspan="5">534353.31</td></tr></table>	534353.31									
247379.36																	
534353.31																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">25132.02</td></tr></table>	25132.02					<table><tr><td colspan="5">312105.97</td></tr></table>	312105.97									
25132.02																	
312105.97																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table><tr><td colspan="5">222247.34</td></tr></table>	222247.34					<table><tr><td colspan="5">222247.34</td></tr></table>	222247.34									
222247.34																	
222247.34																	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">0</td></tr></table>	0															
0																	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">0</td></tr></table>	0															
0																	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Continuing A Majority Party Action Committee (CAMPAC)

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	1		2	0	1	1

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		3	0		2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0	34900
(ii) Unitemized .....	0	2500
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	0	37400
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	41025	338175
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	41025	375575
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received .....	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	23.46	253
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0	0
(b) Levin Funds (from Schedule H5) .....	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	41048.46	375828
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	41048.46	375828

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures .....	25132.02	97387.07
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	25132.02	97387.07
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0	214718.9
24. Independent Expenditures (use Schedule E) .....	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0	0
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements .....	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	25132.02	312105.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25132.02	312105.97

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	41025	375575
34. Total Contribution Refunds (from Line 28(d)) .....	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	41025	375575
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	25132.02	97387.07
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	25132.02	97387.07

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB  
.

Form/Schedule: F3XN

Transaction ID :

Note: Fundraising expenses paid to The Levatino Group were for expenses incurred on behalf of CAMPAC and were not costs associated with any specific candidate.

Form/Schedule:

Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 14

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Continuing A Majority Party Action Committee (CAMPAC)**

Full Name (Last, First, Middle Initial)

## **A. FMR LLC POLITICAL ACTION COMMITTEE - FEDERAL**

Mailing Address 82 Devonshire Street

City State Zip Code  
 Boston MA 02109-3605

FEC ID number of contributing  
federal political committee.

**C** C00380550

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000

Date of Receipt

**11** / **01** / **2011**

**Transaction ID : SA11C-2363-2887-c**

Amount of Each Receipt this Period

5000

Donation

Full Name (Last, First, Middle Initial)

## **B. PG&E Corporation Employees ENERGYPAC**

Mailing Address 77 Beale Street

City State Zip Code  
 San Francisco CA 94105-1814

FEC ID number of contributing  
federal political committee.

**C** C00177469

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500

Date of Receipt

**11** / **01** / **2011**

**Transaction ID : SA11C-3275-2886-c**

Amount of Each Receipt this Period

2500

Donation

Full Name (Last, First, Middle Initial)

## **C. Progress Energy Employees' Federal PAC**

Mailing Address PO Box 1510

City State Zip Code  
 Raleigh NC 27602-1510

FEC ID number of contributing  
federal political committee.

**C** C00091884

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500

Date of Receipt

**11** / **01** / **2011**

**Transaction ID : SA11C-3274-2885-c**

Amount of Each Receipt this Period

2500

Donation

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

10000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 14

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Continuing A Majority Party Action Committee (CAMPAC)**

Full Name (Last, First, Middle Initial)

## **A. RAILAMERICA INC FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address 5300 Broken Sound Boulevard NW

City State Zip Code  
 Boca Raton FL 33487-3520

FEC ID number of contributing  
federal political committee.

**C** C00362095

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3525

Date of Receipt

**11** / **04** / **2011**

**Transaction ID : SA11C-2627-2888-c**

Amount of Each Receipt this Period

3525

Donation

Full Name (Last, First, Middle Initial)

## **B. AMERICAN HEALTH CARE ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 1201 L Street NW

City State Zip Code  
 Washington DC 20005-4024

FEC ID number of contributing  
federal political committee.

**C** C00006080

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000

Date of Receipt

**11** / **07** / **2011**

**Transaction ID : SA11C-2751-2889-c**

Amount of Each Receipt this Period

5000

donation

Full Name (Last, First, Middle Initial)

## **c. Sun Healthcare Group, Inc. PAC d/b/a Sun Healthcare P.A.C.**

Mailing Address 101 Sun Avenue NE

City State Zip Code  
 Albuquerque NM 87109-4373

FEC ID number of contributing  
federal political committee.

**C** C00398826

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000

Date of Receipt

**11** / **14** / **2011**

**Transaction ID : SA11C-3276-2890-c**

Amount of Each Receipt this Period

5000

Donation

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

13525.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 14  
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Continuing A Majority Party Action Committee (CAMPAC)**

Full Name (Last, First, Middle Initial)

## **A. CMS ENERGY-EMPLOYEES FOR BETTER GOVT.-FEDERAL**

Mailing Address 212 W Michigan Avenue

City State Zip Code  
 Jackson MI 49201-2236

FEC ID number of contributing federal political committee. **C** C00075473

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500

Date of Receipt

11 / 16 / 2011

**Transaction ID : SA11C-2010-2892-c**

Amount of Each Receipt this Period

2500

Donation

Full Name (Last, First, Middle Initial)

## **B. AMERICAN HOSPITAL ASSOCIATION POLITICAL ACTION COMMITTEE (AHAPAC)**

Mailing Address 325 7th Street NW

City State Zip Code  
 Washington DC 20004-2818

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000

Date of Receipt

11 / 18 / 2011

**Transaction ID : SA11C-2015-2891-c**

Amount of Each Receipt this Period

5000

Donation

Full Name (Last, First, Middle Initial)

## **C. AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY PAC (PT-PAC)**

Mailing Address 1111 N Fairfax Street

City State Zip Code  
 Alexandria VA 22314-1484

FEC ID number of contributing federal political committee. **C** C00012880

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000

Date of Receipt

11 / 28 / 2011

**Transaction ID : SA11C-2863-2893-c**

Amount of Each Receipt this Period

5000

Donation

**SUBTOTAL** of Receipts This Page (optional)..... ►

12500.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 14

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Continuing A Majority Party Action Committee (CAMPAC)**

Full Name (Last, First, Middle Initial)

## **A. NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 51 Madison Avenue  
Room 1109

City State Zip Code  
New York NY 10010-1603

FEC ID number of contributing  
federal political committee.

C C00158881

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 28 / 2011

Transaction ID : SA11C-2799-2894-c

Amount of Each Receipt this Period

5000

Donation

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

5000.00

**TOTAL** This Period (last page this line number only)..... ►

41025.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 14

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Continuing A Majority Party Action Committee (CAMPAC)**

Full Name (Last, First, Middle Initial)

## **A. CHEMICAL BANK & TRUST**

Mailing Address 333 E Main Street

City

Midland

State

MI

Zip Code

48640-6511

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

253

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 30 / 2011

Transaction ID : SA17-2032-2902-m

Amount of Each Receipt this Period

23.46

Interest

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

23.46

23.46

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 14

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Continuing A Majority Party Action Committee (CAMPAC)**

Full Name (Last, First, Middle Initial)

**A. Aristotle**

Mailing Address 205 Pennsylvania Avenue SE

City Washington      State DC      Zip Code 20003-1164

Purpose of Disbursement  
Campaign software

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 03 / 2011
**Transaction ID : SB21B-3228-2898-e**

Amount of Each Disbursement this Period

75

Full Name (Last, First, Middle Initial)

**B. THE LEVANTINO GROUP**Mailing Address 2501 Wisconsin Avenue NW  
Suite 304

City Washington      State DC      Zip Code 20007-4542

Purpose of Disbursement  
Fundraising coordination fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 15 / 2011
**Transaction ID : SB21B-2752-2899-e**

Amount of Each Disbursement this Period

17855

Full Name (Last, First, Middle Initial)

**C. THE LEVANTINO GROUP**Mailing Address 2501 Wisconsin Avenue NW  
Suite 304

City Washington      State DC      Zip Code 20007-4542

Purpose of Disbursement  
Fundraising expenses, itemized below

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 15 / 2011
**Transaction ID : SB21B-2752-2900-e**

Amount of Each Disbursement this Period

5979.02

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

23909.02

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Continuing A Majority Party Action Committee (CAMPAC)**

Full Name (Last, First, Middle Initial)

**A. Fiola**

Mailing Address 601 Pennsylvania Avenue NW

City  
WashingtonState  
DCZip Code  
20004-2601Purpose of Disbursement  
Catering for event

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2011

**Transaction ID : SB21B-3277-2761-V**

Amount of Each Disbursement this Period

4947.15
---------

**[MEMO ITEM]**

Subitemization of THE LEVANTINO GROUP ( 11/15/11 )

Full Name (Last, First, Middle Initial)

**B. Boston Coach**

Mailing Address 70 Fargo Street

City  
BostonState  
MAZip Code  
02210-2126Purpose of Disbursement  
Car rental fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2011

**Transaction ID : SB21B-3278-2762-V**

Amount of Each Disbursement this Period

308.47
--------

**[MEMO ITEM]**

Subitemization of THE LEVANTINO GROUP ( 11/15/11 )

Full Name (Last, First, Middle Initial)

**C. CHARLIE PALMER STEAKHOUSE**

Mailing Address 101 Constitution Avenue NW

City  
WashingtonState  
DCZip Code  
20001-2133Purpose of Disbursement  
Catering for event

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2011

**Transaction ID : SB21B-3041-2760-V**

Amount of Each Disbursement this Period

599.4
-------

**[MEMO ITEM]**

Subitemization of THE LEVANTINO GROUP ( 11/15/11 )

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
------

--

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## Continuing A Majority Party Action Committee (CAMPAC)

## A. ANDREWS HOOPER PAVLIK PLC

Mailing Address 5915 Eastman Avenue  
Suite 100

City	State	Zip Code
Midland	MI	48640-6824

Purpose of Disbursement
Accounting fees

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : SB21B-1625-2901-e

Amount of Each Disbursement this Period

1223

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1223.00

25132.02